

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Title::	MESENCHYMAL PRECURSOR CELL
Attorney Docket Number::	A20-033CIP
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	28
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	AU
Status::	Full Capacity
Given Name::	Paul
Family Name::	SIMMONS
City of Residence::	Kew
State or Province of Residence::	Victoria
Country of Residence::	AU
Street of mailing address::	Human Stem Cell Laboratory, Peter MacCallum Cancer Institute, Level 1 Research, St. Andrews Pl.

City of mailing address::	East Melbourne
State or Province of mailing address::	Victoria
Country of mailing address::	AU
Postal or Zip Code of mailing address::	3002

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	AU
Status::	Full Capacity
Given Name::	Andrew
Family Name::	ZANNETTINO
City of Residence::	Highbury
State or Province of Residence::	South Australia
Country of Residence::	AU
Street of mailing address::	Hanson Centre for Cancer Research, Institute of Medical and Veterinary Science, Frome Rd.
City of mailing address::	Adelaide
State or Province of mailing address::	South Australia
Country of mailing address::	AU
Postal or Zip Code of mailing address::	5000

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	AU
Status::	Full Capacity
Given Name::	Stan
Family Name::	GRONTHOS

City of Residence:: Colonial Light Gardens
State or Province of Residence:: South Australia
Country of Residence:: AU
Street of mailing address:: Craniofacial and Skeletal Disease
Branch, Institute of Dental and
Craniofacial Research, National
Institute of Health
City of mailing address:: Bethesda
State or Province of mailing address:: MD
Country of mailing address:: US
Postal or Zip Code of mailing address:: 20892-4320

Correspondence Information

Name: Henry D. Coleman
Street of mailing address:: 714 Colorado Avenue
City of mailing address:: Bridgeport
State or Province of mailing address:: Connecticut
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 06605-1601
Phone number:: (203) 366-3560
Fax Number:: (203) 335-6899
E-Mail address:: cosud@erols.com

Representative Information

Representative Customer Number::	28156	
-------------------------------------	-------	--

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/030,411	01/02/02
10/030,411	National Stage of	PCT/AU00/00822	07/07/00

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
AU	PQ 1477	07/07/99	Yes
AU	2003-901668	03/28/03	Yes

Assignment Information

Assignee name:: MEDVET SCIENCE PTY LTD

Street of mailing address:: 33 Dalglish St.

City of mailing address:: Thebarton

State or Province of mailing address:: South Australia

Country of mailing address:: AU

Postal or Zip Code of mailing address:: 5031